

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application : <u>10/735,356</u>	Examiner : <u>GROSZ</u>	GAU : <u>3673</u>
From: <u>BSH</u>	Location: <u>(IDC)</u> FMF FDC	Date: <u>7-7-05</u>
Tracking #: <u>0612880</u>		Week Date: <u>6/6/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input checked="" type="checkbox"/> 1449	<u>5/3/05</u>	<input type="checkbox"/> Continuing Data <input type="checkbox"/> Foreign Priority <input type="checkbox"/> Document Legibility <input type="checkbox"/> Fees <input type="checkbox"/> Other
<input type="checkbox"/> IDS	_____	
<input type="checkbox"/> CLM	_____	
<input type="checkbox"/> IIFW	_____	
<input type="checkbox"/> SRFW	_____	
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE:	<u>Please initial/line through citations.</u> <u>1449-Page 1 of 3 (05-03-2005).</u> <div style="text-align: right; margin-top: 20px;"><u>Thank You.</u></div>
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[XRUSH] RESPONSE:	<div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div>
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INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04